MARYLAND DEPARTMENT OF THE ENVIRONMENT

Land Management Administration • Solid Waste Program

1800 Washington Boulevard • Suite 605 • Baltimore, Maryland 21230-1719 410-537-3375 • 800-633-6101 x3375 • http://www.mde.state.md.us

Sewage Sludge Analysis Report

. Sampling Date:			County:						
4. Results (JI Alialysis	Analysis (Must Attach a Copy of Laboratory R Sample Type					***		
Constituents Analyzed		Grab				Detection Limit	Units		
			8-hr 24-hr Other						
рН									
Solids content							%		
Total kjeldahl nitrogen	TKN						%		
Ammonium nitrogen	NH_4						%		
Total phosphorus	TP						mg/kg		
Total potassium	TK						mg/kg		
Nitrate nitrogen	NO_3						mg/kg		
Total cadmium	Cd						mg/kg		
Total copper	Cu						mg/kg		
Total nickel	Ni						mg/kg		
Total lead	Pb						mg/kg		
Total zinc	Zn						mg/kg		
Total mercury	Hg						mg/kg		
*Total arsenic	As						mg/kg		
*Total molybdenum	Mo						mg/kg		
*Total selenium	Se						mg/kg		
Polychlorinated Biphenyls							mg/kg		
**Calcium Carbonate Equivt	. CaCO ₃						%		
Optional ** Lime Amend S. All constituents within allows							on)		
6. Sample Medium: Liquid	□ Cake					Unstabilized			
□ Dried □ Particulate □ Pellets			☐ Aerobically Digested ☐ Anaerobically Digested ☐ Lime Stabilized ☐ Composted ☐ Heat Dried						
□ Other (Describe):			☐ Other (Describe):						

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TESTING FREQUENCY										
Utilization Category	A Includes Utilization Methods in Categories C and D	B Disposal Land Application and Distribution Transportation						D Incineration		
Plant Capacity (MGD)	<0.05	0.00-	1.0 - 4.99	5.0 - 9.99	10.0- 49.9	50.0- 99.9	≥ 100.0	0.05- 4.99	≥ 5.0	
All Parameters Except PCBs	Once Every 3 Years	Once per Year	Every 6 Months	Once per Month	Every 2 Weeks	Once a Week	Daily	Once per Year	Every 6 Months	Once per Year
PCBs	Once Every 3 Years	Once per Year	Once per Year	Every 6 Months	Once per Month	Once per Month	Once per Month	Once per Year	Once per Year	Once per Year

REPORTING SCHEDULE					
WWTP Design Flow: Avg. Daily Flow: Peak Flow	w: mgd.				
Sampling Frequency Required (Check a box)	Submittal Deadline				
□ Daily □ Weekly □ Every 2 weeks	☐ At the end of each month				
□ Monthly □ Every 6 months	☐ March 1 and August 31				
□ Once per year	□ June 1 of each year				
□ Once per three years	☐ June 1 of the sampling year				
☐ Alternative sampling frequency approved by the Department	☐ June 1 of the sampling year				
Report Due Date : □ March 1 □ August 31 □ June 1					

Certification: As an authorized representative of the named sewage sludge generator, I certify that the information provided in this report is correct and complete to the best of my knowledge.					
Name:	Title:				
Signature:	Phone:				
Email Address:	Date:				

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